Quality and Patient Safety

Alaska Health Care Commission
October 3, 2014

ASHNHA

ALASKA STATE HOSPITAL &
NURSING HOME ASSOCIATION

Today's Triad

- Measurement, Reporting & Scoring Quality and Patient Safety Outcomes
- Overview of national initiative activity in AK
- Data Dive and its role in quality improvement

Measurement, Reporting & Scoring Quality and Patient Safety Outcomes

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Alaska's Hospitals

- 13 Critical Access Hospitals
  - 25 beds or less
  - 9 are cohoused with Long-Term Care
  - Specific rules and regulations apply

- 8 Inpatient Prospective Payment Systems
  - 26 beds or more
  - includes "tweeners"
    - ✓ little hospitals with big city problems
    - ✓ Central Peninsula, Mat-Su, Bartlett, Yukon-Kuskokwim
  - Does not include adult/child psych, military/VA hospitals, or Rehab

Mandated Reporting

Inpatient Prospective Payment Service	Critical Access Hospitals
Core Measures	Core Measures
National Health Safety Network(NHSN)	
NHSN Data conferred to AK Section of Epidemiology	
Patient Satisfaction Survey(HCAHPS)	
Hospital Based Inpatient Psychiatric Core Measure Sets	

Mandated Reporting

Hospital Compare Core Measures—IPPS and CAHs

- Heart Failure
- Pneumonia
- Inpatient and Outpatient AMI and Chest Pain
- Surgical Case Improvement Project—9 measures
- Inpatient and Outpatient stroke
- Outpatient Surgery
- Emergency Department Throughput
- Venous-thromboembolism
- Perinatal Care

Mandated Reporting

National Health Safety Network

Manually Entered by IPPS hospital staff:

- Catheter Associated Urinary Tract Infections
- Central Line Blood Stream Infections
- Surgical Site Infections
- Methicillin Resistant Staph Aureus
- Clostridium Dificile
- Vaccinations--all employee healthcare personnel, licensed Independent practitioners (physicians, NP, PA), adult students, trainees and volunteers.
- Also conferred to Section of Epidemiology per recent regulatory mandate

HCAHPS Survey—Patient Satisfaction Survey

Mandated Reporting

Hospital-Based Inpatient Psychiatric Services Core Measure Set

HBIPS-1 Admission screening for violence risk, substance use, psychological trauma history and patient strengths completed

HBIPS-2 Hours of physical restraint use

HBIPS-3 Hours of seclusion use

HBIPS-4 Patients discharged on multiple antipsychotic medications

HBIPS-5 Patients discharged on multiple antipsychotic medications with appropriate justification

HBIPS-6 Post discharge continuing care plan created@

HBIPS-7 Post discharge continuing care plan transmitted to next level of care provider upon discharge

Voluntary Reporting

- National Database for Nursing Quality Improvement(NDNQI)
- Association for Healthcare Research Quality(AHRQ)
- LeapFrog
- Medicare Based Quality Improvement Project—CAHs only

Voluntary Reporting--continued

- Critical Access Hospitals- Medicare Based Quality Improvement Project
  - Emergency Inpt & Outpt—7 measures
  - Heart Failure—3 measures
  - Pneumonia –2 measures
  - Acute MI inpt & Outpt—8 measures
  - Surgical inpt & outpt—9 measures
  - Influenza—2 measures
  - Perinatal—1 measure
  - Stroke—8 measures
  - VTE—6 measures
  - HCAHPS
  - Mortality Readmissions/Complications
  - HAI Measures

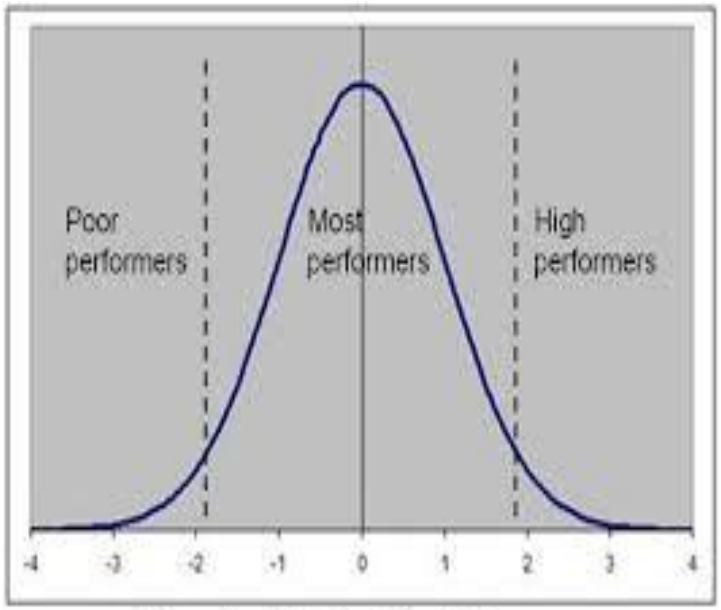
CMS Pay for Performance

- Value Based Purchasing Score
- Readmissions Score
- Hospital Acquired Condition Score

Scoring Highlights

- Data is up to 2 years old, depending on the measure
  - Gold Standard is concurrent review of data
- Broad variance in interpretation of many metrics, documentation of care, and billing coding
- There are winners and losers

Based on a Bell Curve



Productivity Bell Curve

There will be winners and losers

Pay for Performance

Up to 6% Medicare Part A revenue at risk:

- Value-based Purchasing (2%)
- Readmissions (3%)
- HAC (1%)
- Commercial Payer P4P Programs are certain to follow

Summary of Measurement, Reporting and Scoring Penalties

- The number of metrics has increased enormously over the past 5 years
- The mandates are continuously changing—adding new ones and rarely subtracting
- Analysis at the federal level is too retrospective
- Aggregation diminishes value of the data
- The increase in mandates and penalties achieved the timely goal of grabbing the attention of hospital leadership, but…

…More data mandates and penalties potentially counterproductive

There is plenty of data and a scarcity of time/staff to use the data for improvement

Overview: ASHNHA Statewide Quality Effort

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Triple Aim

1. Improving the patient experience of care

2. Improving the health of populations

3. Reducing the per capita cost of health care

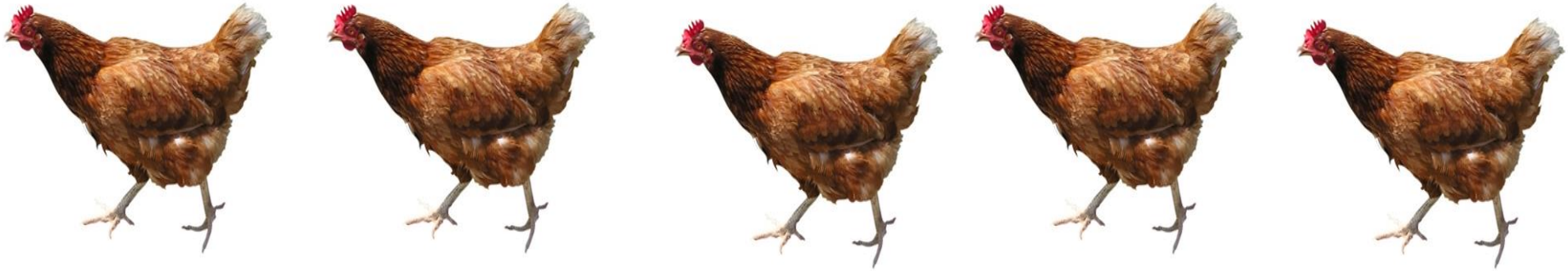
ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Hospital Engagement Network goal:

To Reduce Hospital Acquired Conditions by 40% and reduce preventable readmissions by 20% by December 08, 2014

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION



- Central line-associated blood stream infections (CLABSI)
- Catheter-acquired urinary tract infections (CAUTI)
- Surgical infections and complications
- Venous thromboembolisms (VTE)
- Adverse drug events
- Falls
- Birth-related injuries
- Pressure ulcers
- Ventilator-associated pneumonia (VAP)
- Readmissions

ASHNHA Statewide Quality Effort

HEN Participants	Non-HRET HEN Participants
Alaska Psychiatric Institute Alaska Native Medical Center Alaska Regional Hospital Bartlett Regional Hospital Central Peninsula Hospital Maniilaq Health Center Mt. Edgecumbe Hospital Norton Sound Health Corporation PeaceHealth Ketchikan Petersburg Medical Center Sitka Community Hospital South Peninsula Hospital Wrangell Medical Center Yukon Kuskokwim Health Center	Fairbanks Memorial Hospital Providence Anchorage Medical Center

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Education and Training

Weekly Webinars

Date	Topic
9/9 **10-10:30am**	**Medicare's Hospital Inpatient Quality-Based Payment Reforms for FFY 2015 and Looking Ahead to FFY 2016, Kevin Krawiecki, DataGen**
9/16 1-1:30pm	**CAUTI Talk, Barb DeBaun, Cynosure**
9/23 1-1:30pm	**Intro to Livanta**
9/30 1-1:30pm	**Mountain-Pacific 11th SOW**
10/7 1-1:30pm	**How to fully implement beside opioid monitoring in less than 90 Days, Lisa Maloney, Caldwell Medical Center**

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

ASHNHA Quality Conferences

3 Quality Conferences in 2 years

- Focus: Evidence-Based Practice
  - Readmissions
  - Adverse Drug Events
  - Patient and Family Engagement
  - Patient Safety Culture Development
- Attended by over 60 attendees representing all hospitals in AK

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Boot Camps and Subject Matter Expert Site Visits

Dr. Tremain

- Adverse Drug Event Reduction Boot Camp
- 5 Site visits
- Post-site visit support

Dr. Quigley

- Facilitates and Statewide Falls Calls
- Site visits to 13 acute and LTC in 2013/14
- Post-site visit support with individual teams and during statewide calls

Mentors for Quality—M4Q

- 7 Mentoring Pairs
- QI/IP Focus Project
- Mentoring site visits
- Weekly mentoring calls
- Biweekly Education
- Biweekly Round Table

- Poster Session Presentations Oct 23-24th, Pt. Safety Conference

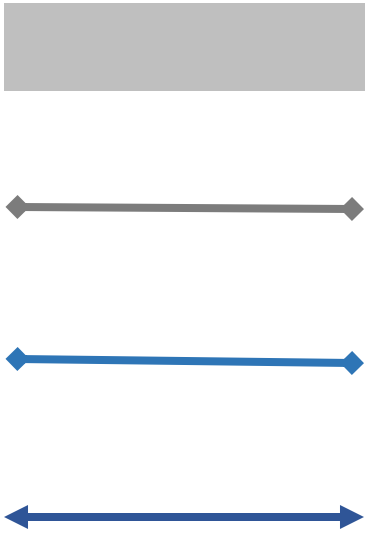
ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION


Reduce Anticipated Falls & Falls
Petersburg Medical Center
Petersburg, Alaska
Lessons Learned
Recommendations and Next Steps

ASHNHA

ALASKA STATE HOSPITAL &
NURSING HOME ASSOCIATION

Graph Key



1490 AHA HEN participating hospitals across the US

All AK hospitals combined rate

PPS hospitals combined rate

Critical Access AK hospitals combined rate

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

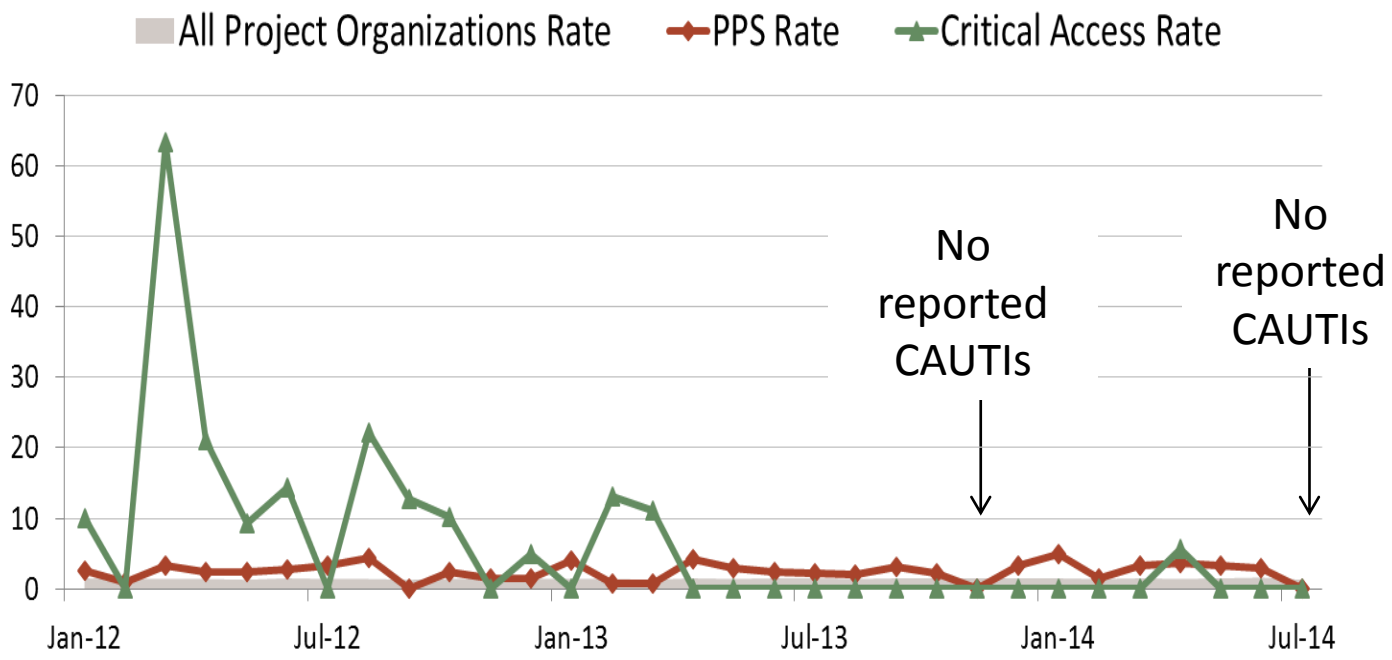
ASHNHA Statewide Quality Effort

HEN Participants	Non-HRET HEN Participants
Alaska Psychiatric Institute Alaska Native Medical Center Alaska Regional Hospital Bartlett Regional Hospital Central Peninsula Hospital Maniilaq Health Center Mt. Edgecumbe Hospital Norton Sound Health Corporation PeaceHealth Ketchikan Petersburg Medical Center Sitka Community Hospital South Peninsula Hospital Wrangell Medical Center Yukon Kuskokwim Health Center	Fairbanks Memorial Hospital Providence Anchorage Medical Center

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Catheter Associated Urinary Tract Infections

Rate of hospital-acquired CAUTI/1000 Cath Days

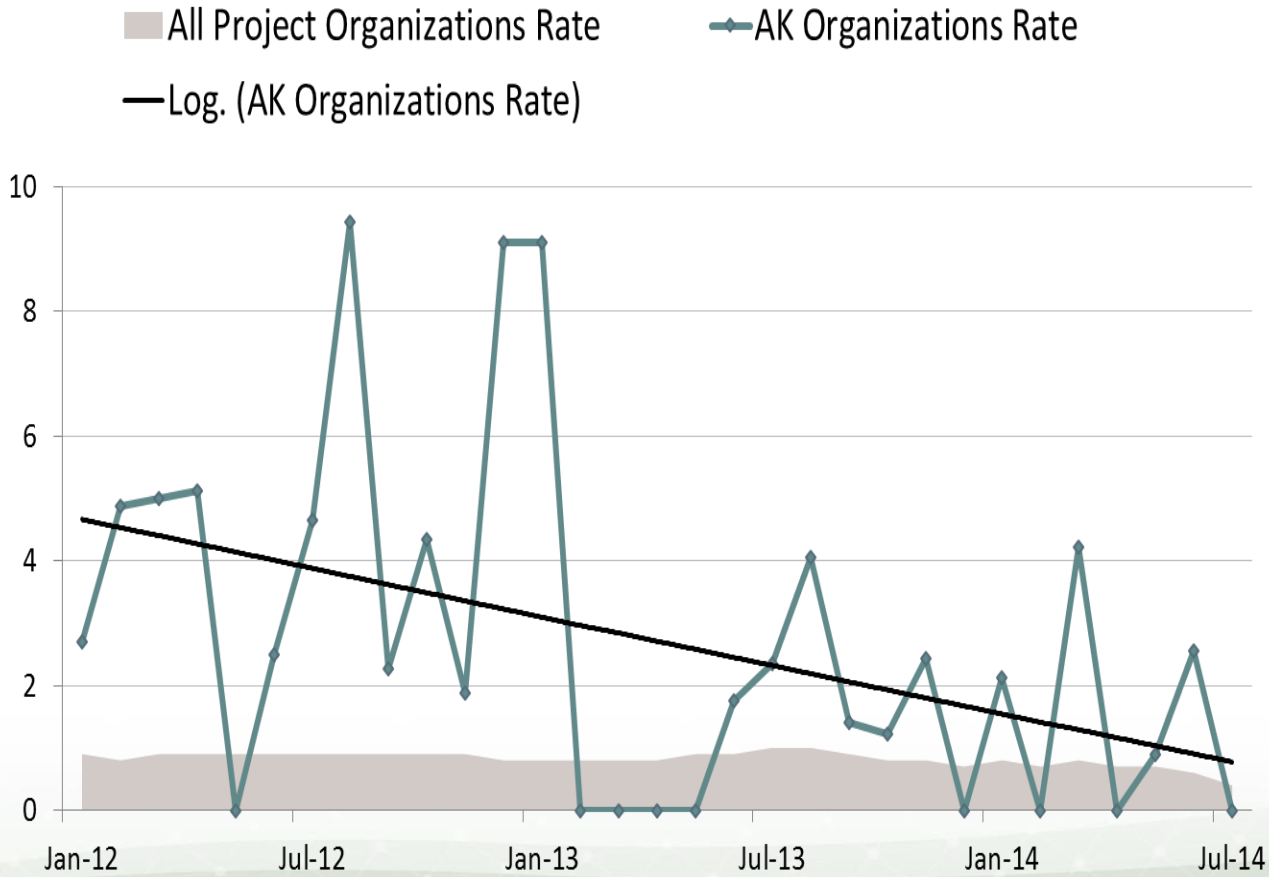


- CAH's made huge advancements between 2012 and mid-2013. They had a 12-month run of no CAUTIs beginning in April 2013.
- Nov-13 and Jul-14 saw no reported CAUTIs in the state.

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Surgical Site Infections

Surgical Site Infections/ 100 Surg. Patients

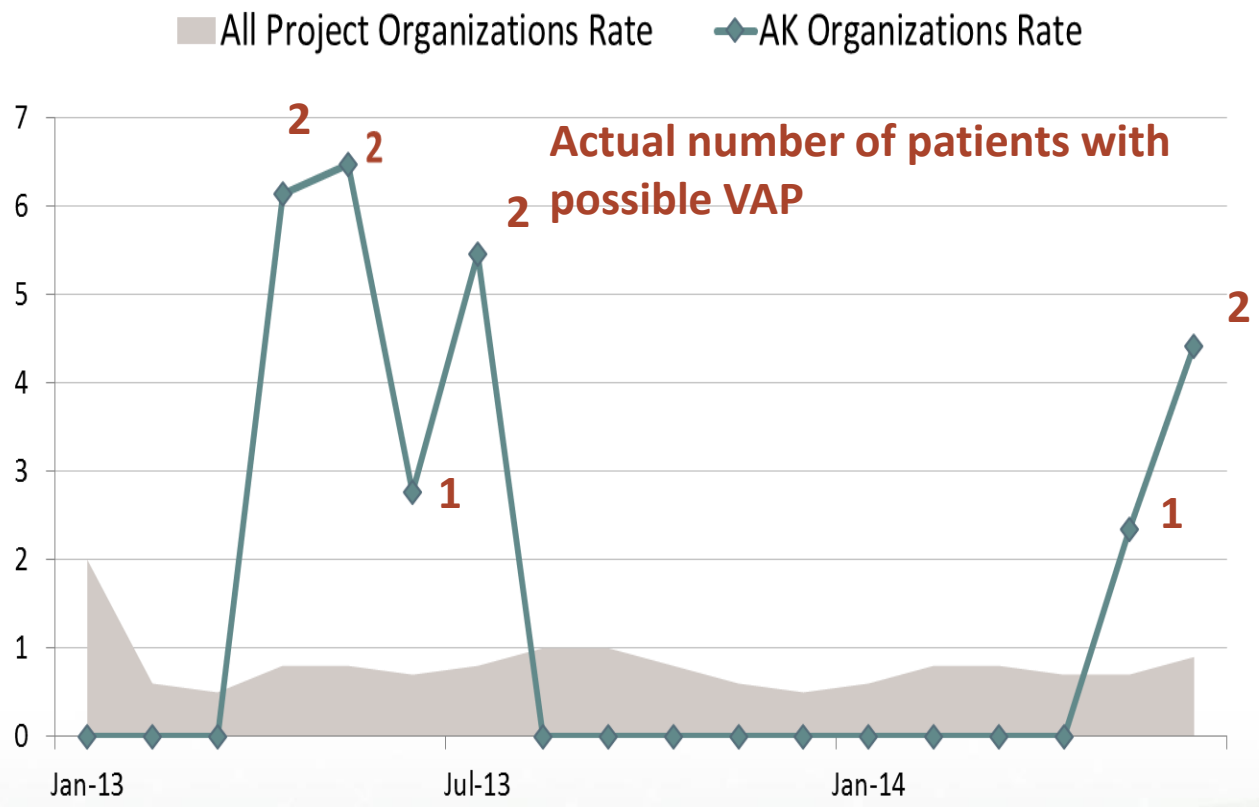


ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Ventilator Associated Events

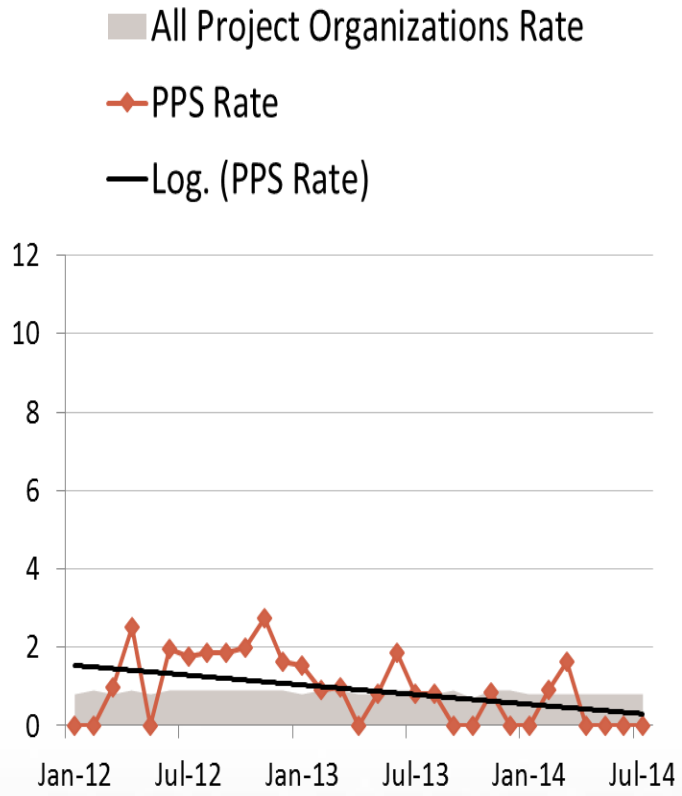
Rate of Possible, Probable VAP / 1000 Vent Days

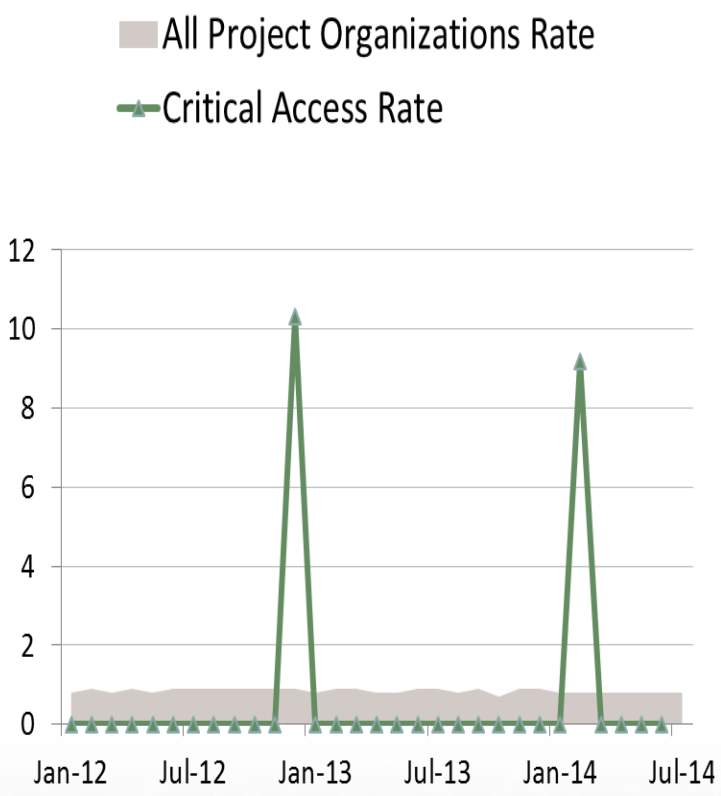


ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Central Line Blood Stream Infections

Rate of hospital-acquired CLABSI /1000 Line Days





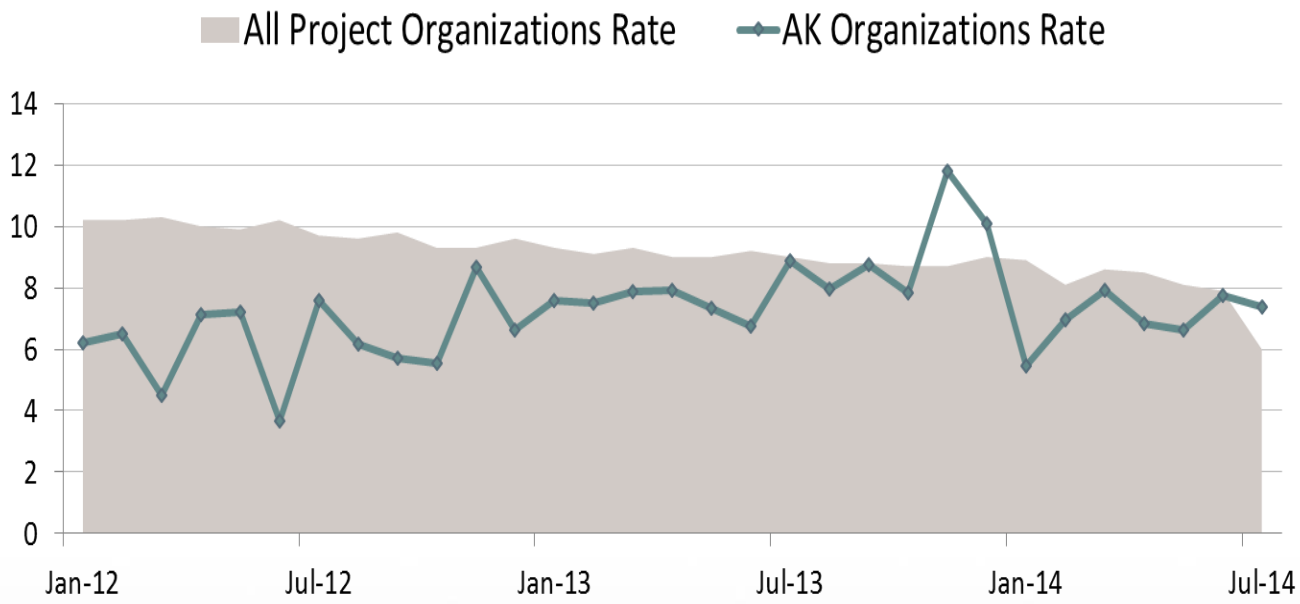
No month exceeded 3 CLABSIs among all AK hospitals reporting

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Preventable Readmissions

Rate of 30-day inpatient readmissions / 100 live discharges



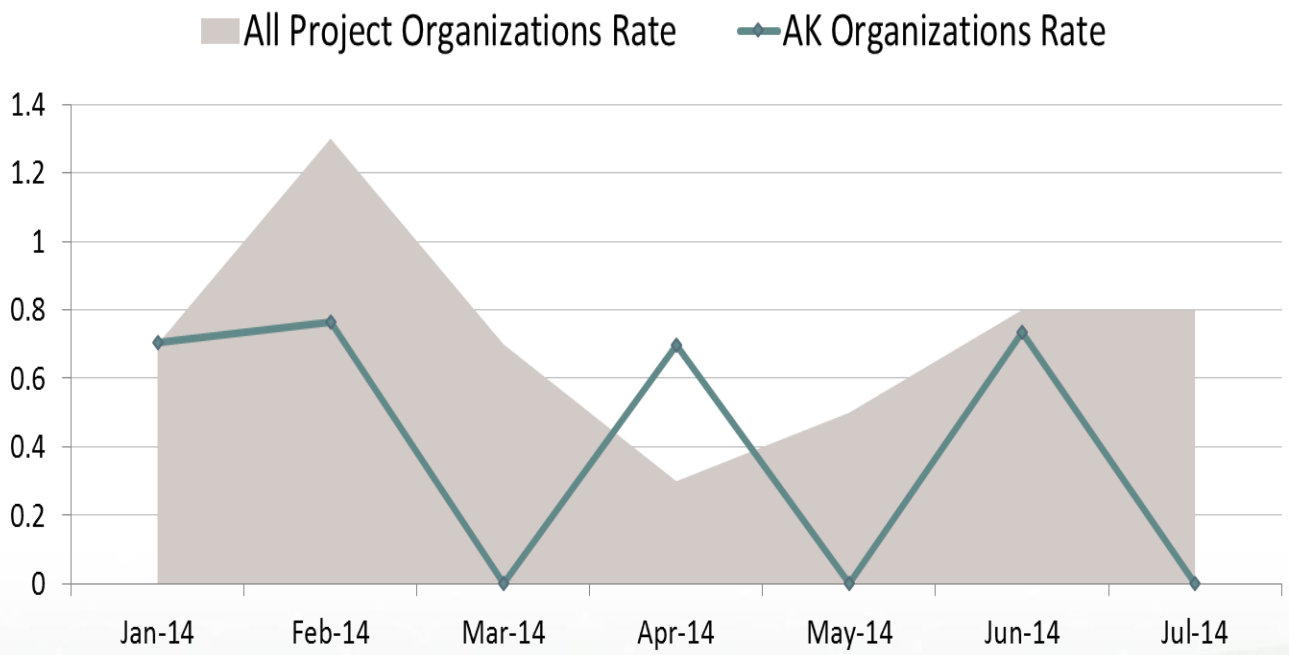
4Q13 had very low submission, which appears to affect the combined rates

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Pressure Ulcers

Rate of hospital acquired stage III or greater ulcers /1000 discharges

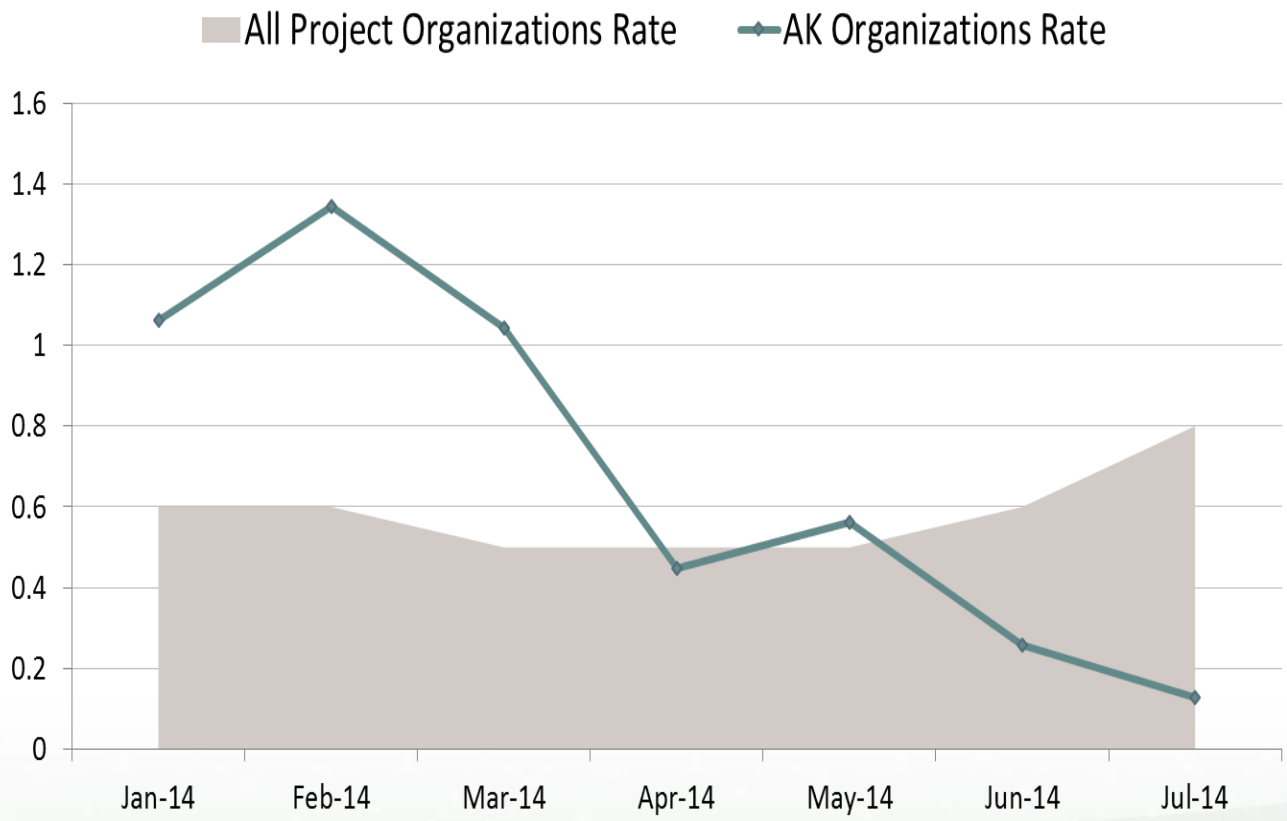


ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Adverse Drug Events

Rate of reversal agents needed /100 pts on opioids

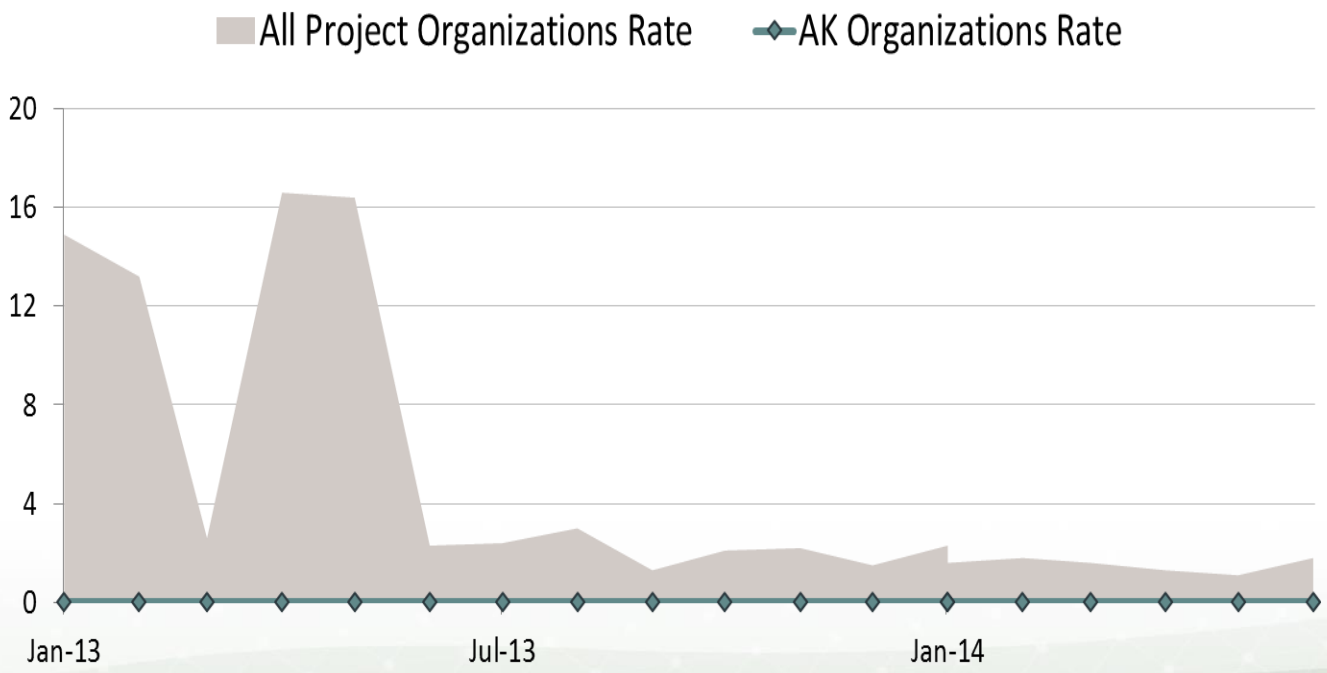


ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

VTE

Patients with hospital-acquired VTE who did not receive VTE prophylaxis between hospital admission and the day before the VTE diagnostic testing

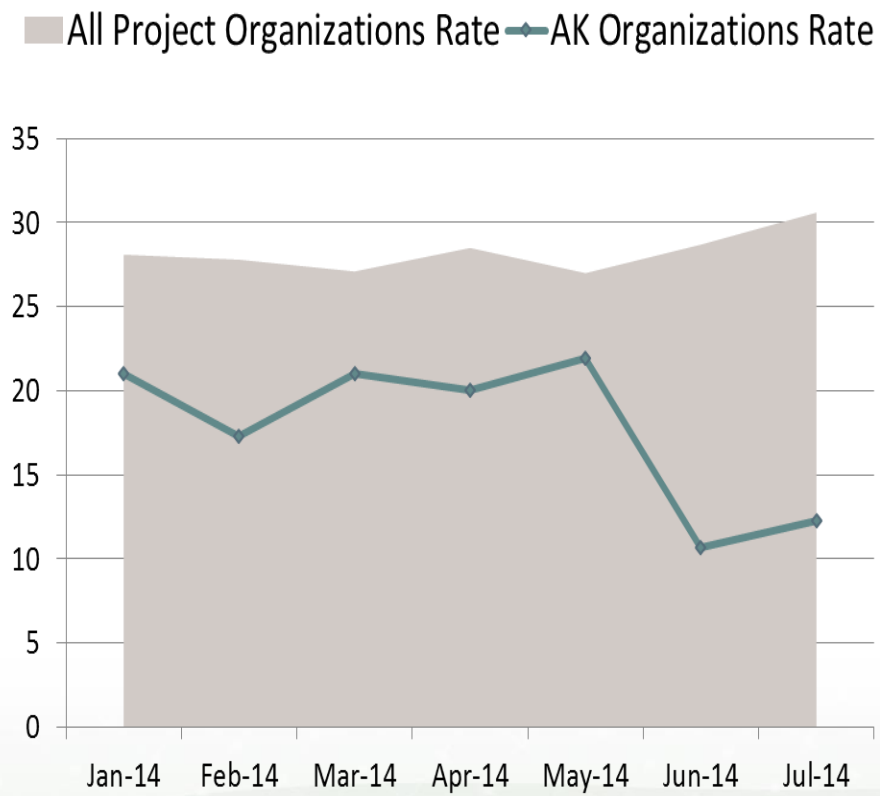


ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Cesarean Section

Cesarean Frequency Rate/100 NTSV

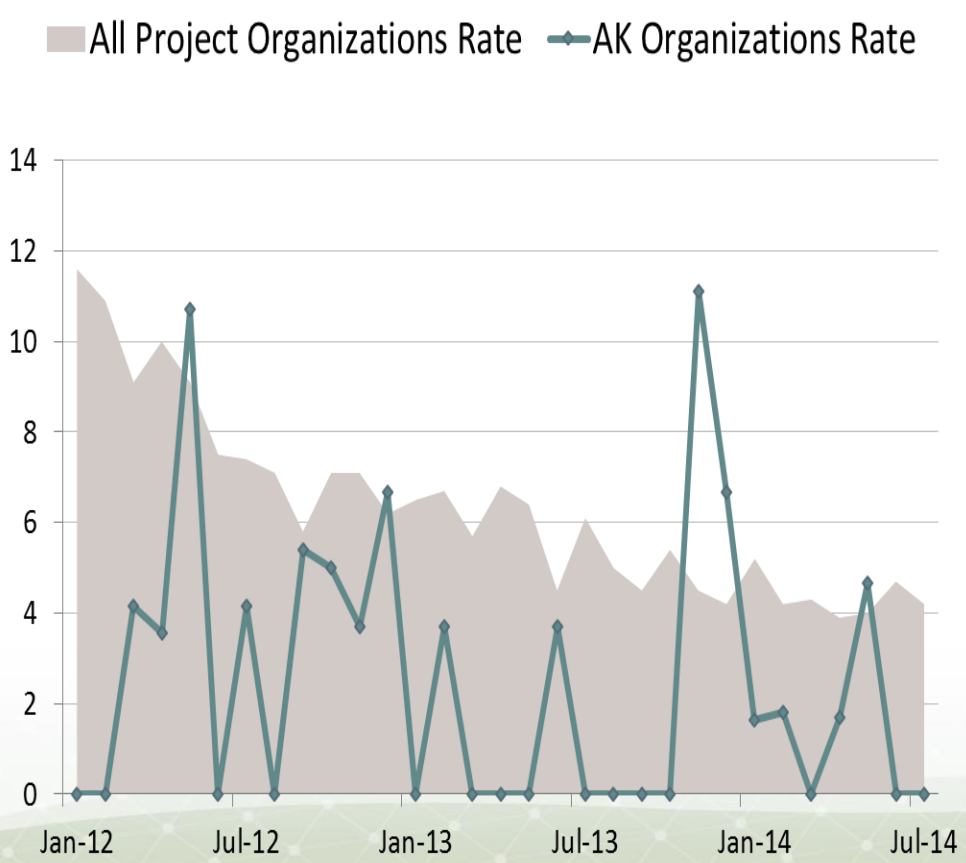


- Target is < 20
- 10 Hospitals report
- Initial data is excellent

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Early Elective Deliveries

Rate of Elective Deliveries 37-39 Weeks /100 Patients with non-elective delivery



Hospitals with no EEDs reported:

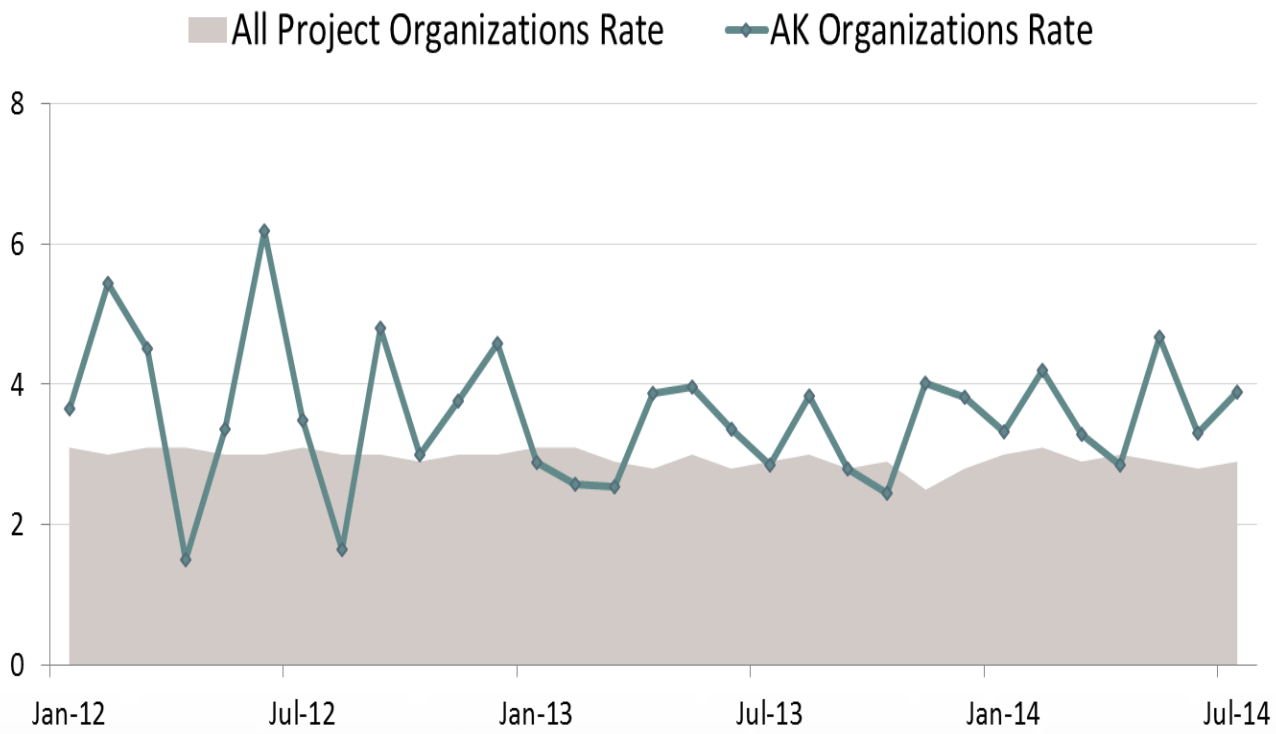
- ANMC
- FMH
- Maniilaq
- Petersburg
- Sitka
- South Penn
- Yukon-Kuskokwim

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Falls

Falls Rate With/Without Injury /1000 Inpatient, Observation Days



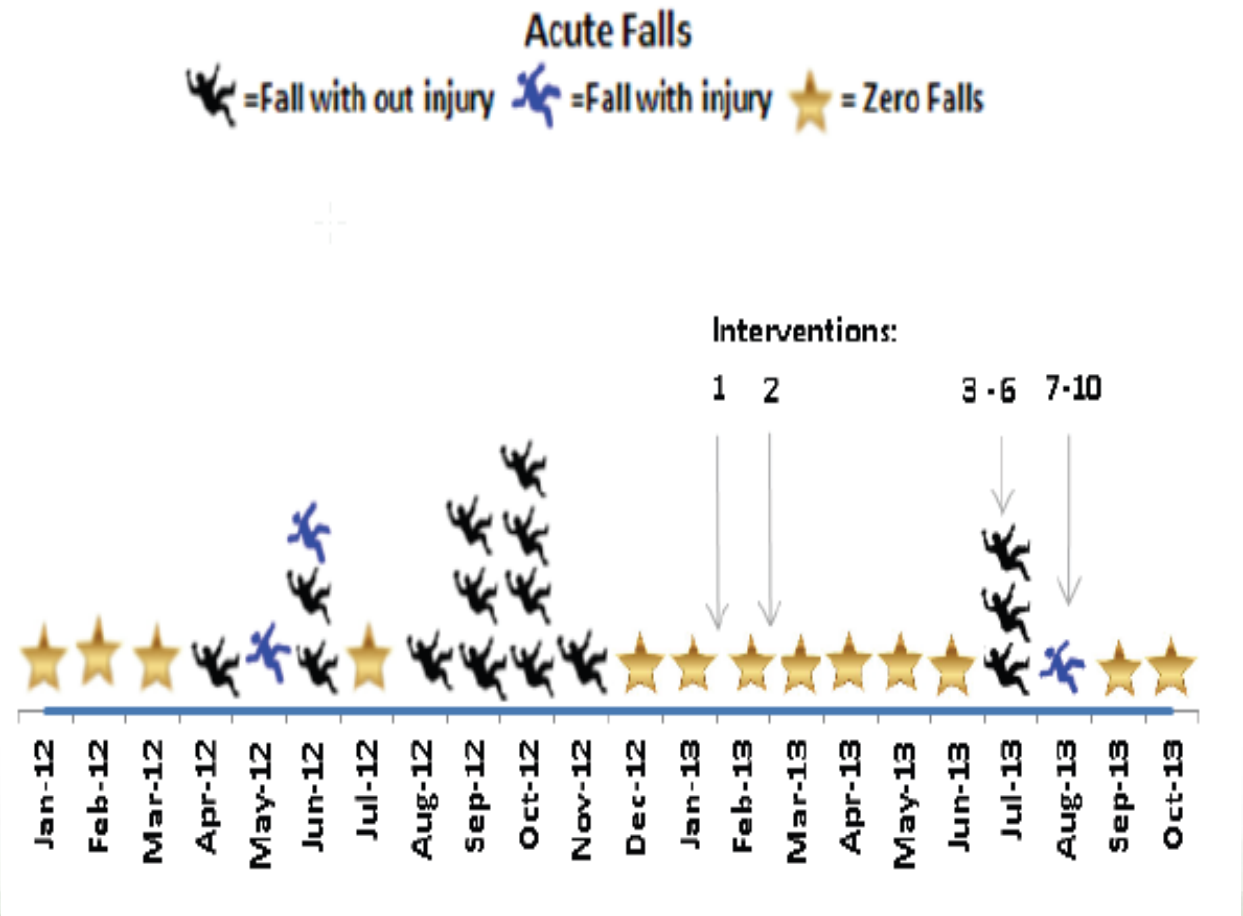
Spikes in falls rates are generally due to falls in smaller hospitals with lower patient days

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

ASHNHA

ALASKA STATE HOSPITAL &
NURSING HOME ASSOCIATION

Petersburg Medical Center



ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

"Winning by Reducing Harm"

Project Champions- Barbara Jacobson, Debra Samson, Kathy Katongan

Date:11/21/2013

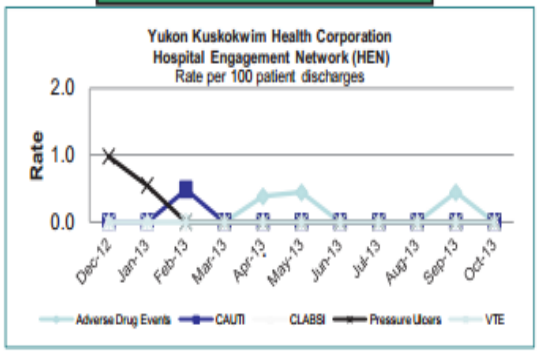
Aim Statement

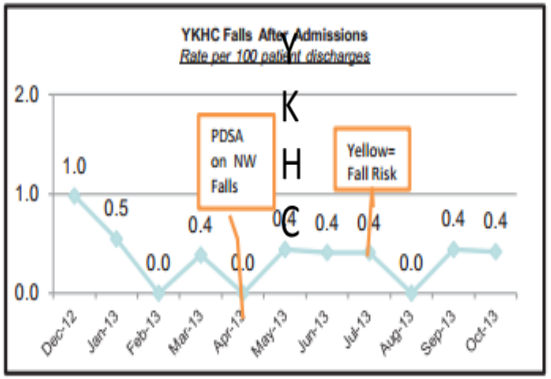
YKHC's vision is to describe the process to systematically to monitor quality of care, identify and drive opportunities for hospital and organizational improvement , and prioritize initiatives to increase patient safety

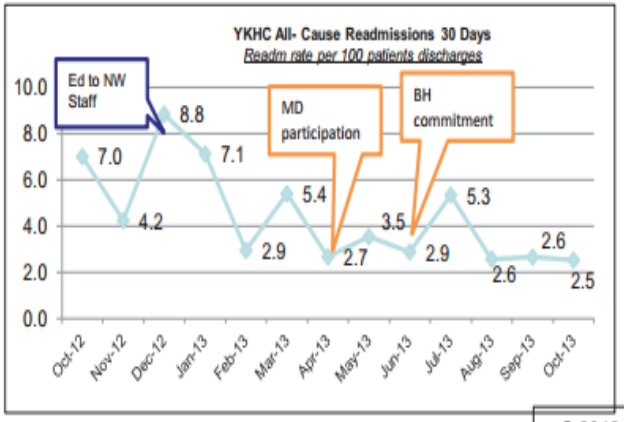
Defining Moments

- Implemented CHF D/C instructions upon admission, discharge with Yu'pik translators
- Education to the nursing staff on CORE measures
- Corporate-wide changes from paper to EMR (RAVEN)
- Implemented Post Fall Huddle/Awareness campaign

Run Charts







Lessons Learned

- Physician and nursing engagement is key to drive success
- Employee awareness of Harm Across the Board (HAB)

Recommendations and Next Steps

- Presentation on HAB corporate-wide including the YKHC Board
- Develop CORE measures that are comparable that nation-wide and state-wide

Team Members

Barbara Jacobson, CNE
William Schreiner, PI Director
Ronald Bowerman, MD
Sue Varhola, Inpt/OR Manager
Rachelle White Asst Inpt Manager
Melanie Gibson, Pharmacy Director
Debra Samson, RN PI
Kathy Katongan, PI
Linda Weisweaver, RM
Lori Chikoyak, Inf Control
Sandra Abdiu, BH QA

PROVIDENCE
Health & Services
Alaska

Hand washing Audits

Hand Hygiene Compliance	01/13	02/13	03/13	Q1	04/13	05/13	06/13	Q2	07/13	08/13	09/13	Q3	10/13	11/13	12/13	Year to date, 2013
Hand Hygiene Compliance Composite Score																
Imaging	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%
Clinic	89%	100%	36%	75%	86%	100%	100%	93%	100%	80%	83%	88%				85%
Acute	75%	83%	80%	79%	100%	100%	92%	100%	62%	75%	84%	73%				84%
LTC	Not available	84%	Not available	84%	97%	82%	88%	89%	100%	82%	100%	94%				89%
Physical Therapy	93%	93%	87%	91%	97%	100%	100%	98%	100%	100%	100%	100%				96%
Lab	80%	100%	100%	93%	100%	100%	100%	100%	100%	100%	100%	100%				98%

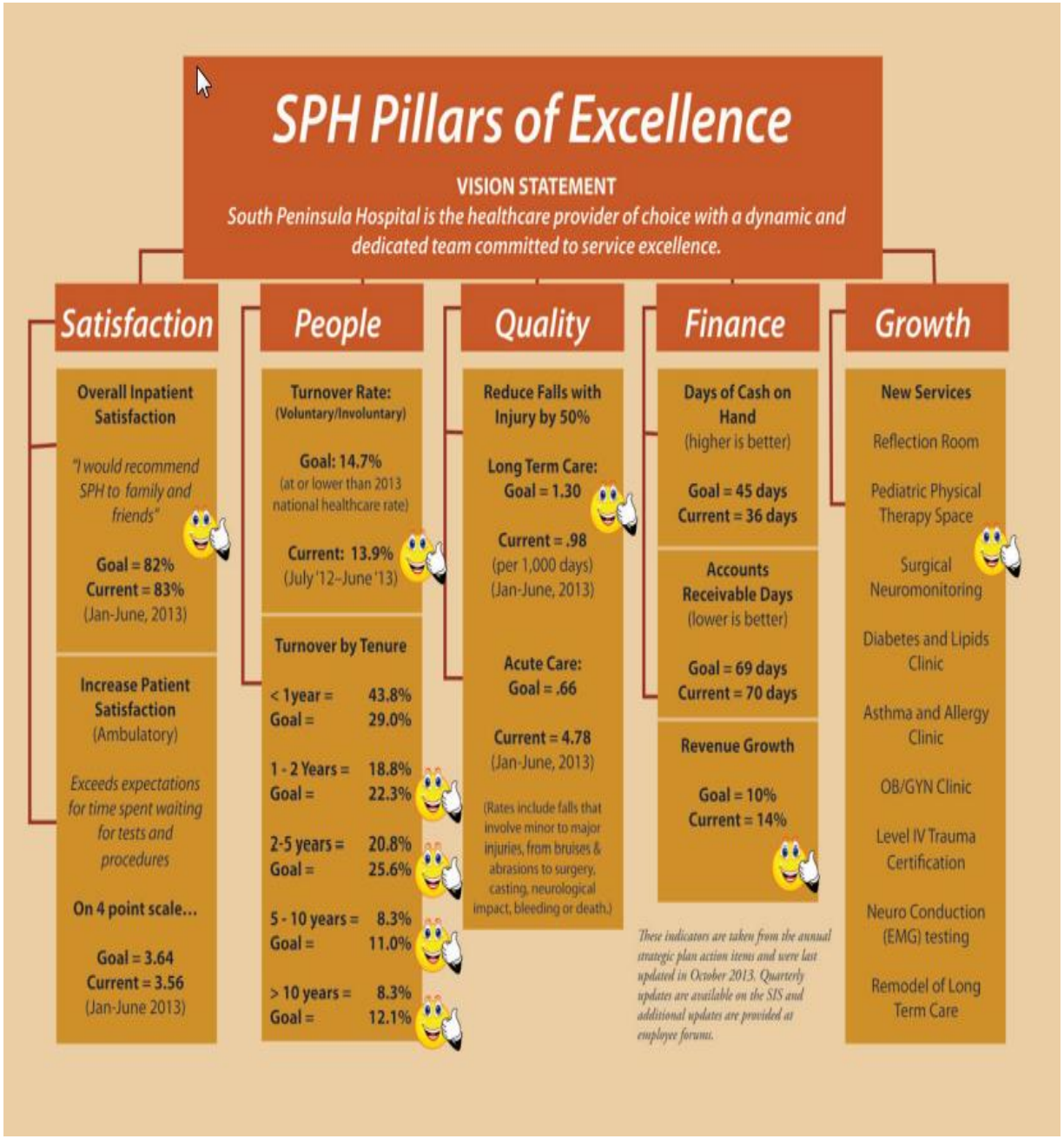
SCORECARE:

ON TARGET-ABOVE 90%

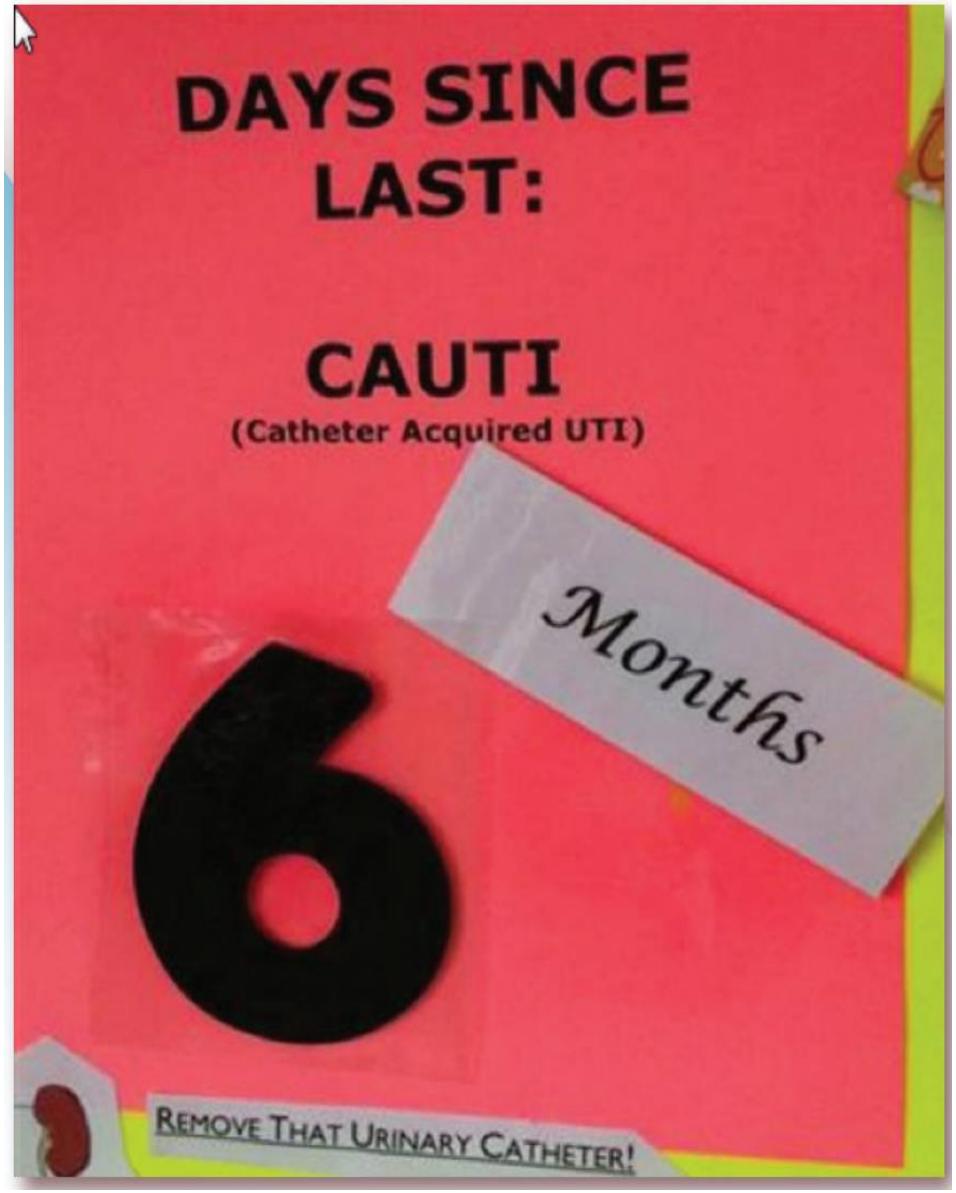
NEEDS IMPROVEMENT-75%-89%

NEEDS IMPROVEMENT, SUBSTANDARD-LESS THAN 75%

South Peninsula Hospital



Bartlett Regional Hospital



Summary of Collective Quality Effort

Critical Elements

- Effort is voluntary
- Supported by education evidence based, face-to-face with subject matter experts
- Driven by data

Successes

- Statewide participation and data submission
- Deep organizational engagement

Challenges

- Lag in payment reform stunting QI progress
- Depth and stability of workforce

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Steamship Cottage City

Skagway Bay, Alaska

Newspaper Clipping 1970

42 Anchorage Daily Times Friday, December 18, 1970

READY FOR HAPPY HOLIDAY

Hugh J. Wade, 5, and his sister, Megan, 2, couldn't be more delighted with their baby sister, Gretchen Marie, being held here by their mother, Mrs. Jerry Wade, 4800 Shelikof St., now that she's at home with them. The infant was born with a partially absent and misconnected esophagus, which made surgery necessary when she was less than a day old. Now 15-days old, the infant was the third child in the state's history to have successful corrective surgery for this condition.

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Newspaper Cover 2014

ASHNHA

ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Today vs 1970

Less empathy?

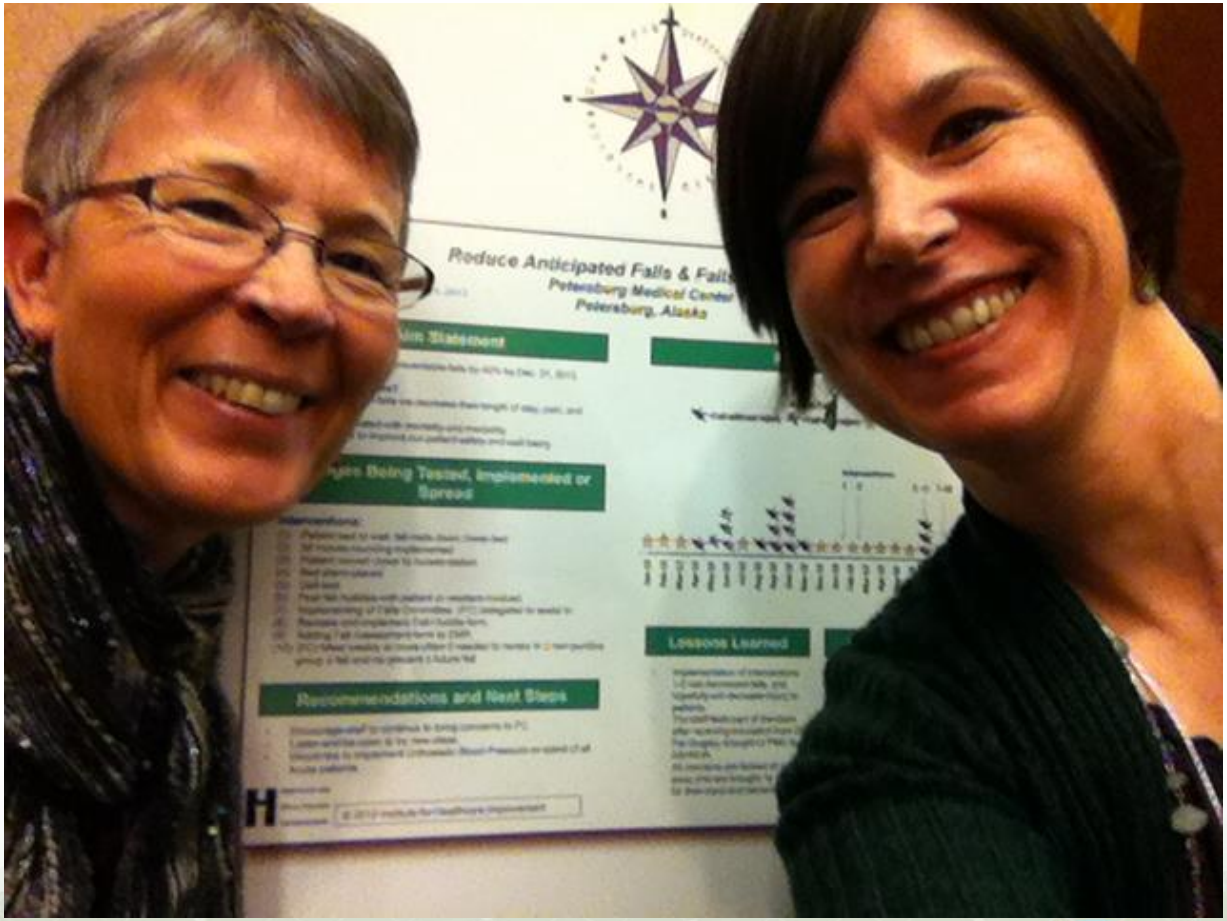
Less skill?

Less training?

Less knowledge?

Less passion?

Exceptional not Anomalous



ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Yes--We Can and Must Do Better

- Standardize Care
- Employ Evidence Based Medicine
- Hospitals Co-lead with strong physician role
- Data Driven Quality Improvement
- Multi-stakeholder Collaboratives

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION

Thank You

Greta Wade, RN
Quality and Patient Safety Director
Alaska State Hospital and Nursing Home Association
907-723-7105 greta@ashnha.com

ASHNHA
ALASKA STATE HOSPITAL & NURSING HOME ASSOCIATION